Political Organization
Notice of Section 527 Status

OMB No. 1545-1693

1 Name of organization	<u>son</u>		T =
FP	cends of To	m Raga	Employer identification number
2 Mailing address (P.O. Box or	number, street, and room or suit	e,number)	10/ 1/2/20/
<u> </u>	35 Eagle C	<i>f</i> .	
City or town, state, and ZiP or		11-7111	
	nson ON «	70040	
3 E-mail address of organization		1 1 1 1 1 1	
	M. Paga 6) u	<u>ronldnet att. 1</u>	$\gamma e t$
4a Name of custodian of records	(ustodian's address	2
	-	ustodian's address 4325 EQG/6	2 C/
	-T- P-		
	TOWI KOGO	<u> 11/0500 ON</u>	45040
5a Name of contact person	<i>○</i> / 56 C	ontact person's address	. 100
		6325 12916	ri . Cak
.,	Town Rom	ma-a-	1 1102112
6 Business address of organizat		IMASON ON	<u> 40070 </u>
	or (ii dirierent morn mailing addi	ress shown above). Number, stree	et, and room or suite number
City or town, state, and ZIP co			
any or town, atom, and Zir Ct	140		
Purpose			
Describe the purpose of the or	ganization		
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List of All Relate	d Entities (see instruction	e)	
la Name of related entity	8b Relationship	8c Address	
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or Paperwork Reduction Act Noti-	ce, see page 4.	Cat. No. 30405V	Form <b>8871</b> (7-2000)



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